FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

Parties must be filed electronically.

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

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File with: lowa Ethios and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, lowa 50318 Fax: 515-281-4073

Reset Form COMMITTEE NAME (Must be same as on Statement of Organization) FORM Committee to Re-Elect Glenice DR-2 DISCLOSURE IMPORTANT: Indicate by # type of committee you are reporting for: (Rev. 12/2009) (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (10) School Board or Other Pac (10) School Board o REPORT For Office Use Only Comm. # CANDIDATE COMMITTEES ONLY: Looped In Candidate Name Political Party (if applicable) Scanned <= Glenia Computer Office Sought Van Buren District (if Senate or House) Audited Late reports are subject to possible civil and oriminal panalties. Pursuant to lowa Code sections 668.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports. MGNATURE OF PERSON FILING REPORT TELEPHONE 201 AM FILING A REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. Indicate by # □CHECK IF AMENDMENT TO REPORT DATED Local Committees, enter Date of Election ☐ Check If this is final (termination) report and attach Notice of Dissolution Form DR-3. County & Local Committees, enter County in (You must continue to file reports until a DR-3 is filed.) which Election is held STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ..... ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ........ Schedule F: Loans Received total (Attach Schedule F) ..... Schedule H: Total Sales of Campaign Property (Attach Schedule H). (Schedule H applies to Candidates' Committees Only) SUB-TOTAL. SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below)...... Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must be zero) ...... \*\*UNPAID BILLS (From Schedule D - Attach Schedule D)..... \*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .......... →OUTSTANDING LOANS (From Schedule F - Attach Schedule F)..... CONSULTANT BREAKDOWN (Schedule G Attached?) YES. CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

## For Instructions, See Back of Form

| CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds) | <b>A</b><br>(Rev. 07/03) | MONETARY<br>RECEIPTS         |
|---|--------------------------|------------------------------|
| COMMITTEE NAME (Must be same as on Statement of Organization)       | _                        | CK THIS BOX IF<br>NDING FORM |
| Committee to Re-Elect Glenice Grabor For Recorder                   |                          |                              |

SCHEDULE

Reservonic

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE; ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE<br>RECEIVED<br>(MM/DDYR) | PAC ID NUMBER<br>(if applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP<br>TO CANDIDATE*<br>(if applicable) | AMOUNT<br>RECEIVED | VIFFOR<br>FUND-<br>RAISER<br>INCOME |
|-------------------------------|---|---------------------------------|--|--------------------|-------------------------------------|
| 11-02-10                      | CK# 0794  | Van Buren County   Commo        |  | \$ 400.00          |                                     |
|                               | ID#<br>CK#  |                                 |  |                    |                                     |
|                               | ID#   |                                 |  |                    |                                     |
|                               | ID#   |                                 |  |                    |                                     |
|                               | CK#   |                                 |  |                    |                                     |
|                               | CK#   |                                 |  |                    |                                     |
|                               | CK#   |                                 |  |                    |                                     |
| -                             | CK#   |                                 | <u>.</u>   |                    |                                     |
|                               | ID#<br>CK#  |                                 |  |                    |                                     |
|                               | ID#   |                                 |  |                    |                                     |
|                               | ID#   |                                 |  |                    |                                     |
|                               |   |                                 | SUB-TOTAL  | s 400 ex           |                                     |
|                               |   | TOTAL (if last page             | of this schedule)                                | \$ 400,00          |                                     |

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page (for Schedule A)

| FOR INSTRUCTIONS | 3, SEE BACK OF | <b>FORM</b> |
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## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| SCHEDULE<br>B<br>(Rev. 07/03) | MONETARY<br>EXPENDITURES      |
|-------------------------------|-------------------------------|
|                               | CK THIS BOX IF<br>ENDING FORM |

|                                |  | same as on Statement of Organization)                  |                                   |               |                    |
|--------------------------------|--|--|-----------------------------------|---------------|--------------------|
| Commit                         | tre to Re-E  | lect Glenice Graber f                                  | r Recorder                        |               |                    |
| DATE<br>EXPENDED<br>(MM/DD/YR) | CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER | EXPENDITURE (Disbursement) WAS MADE                    | (DESCRIBE TRANSAC                 |               | AMOUNT<br>EXPENDED |
| 11-62-10                       | 1030   | Glenice Graber<br>26405 vine Ave<br>Bonopark, IA 52620 | Reimburs<br>campaign<br>expenditu | e<br>ces      | \$ 400,00          |
|                                | ID#  | · ·  | •                                 |               |                    |
|                                | CK#  |  |                                   |               |                    |
|                                | ID#  |  |                                   |               |                    |
|                                | CK#  |  |                                   |               | :<br>              |
|                                | ID#  |  |                                   |               |                    |
|                                | CK#  |  |                                   |               |                    |
| ·                              | ID#  |  |                                   |               |                    |
|                                | СК#  |  |                                   |               | ,                  |
|                                | ID#  |  |                                   |               |                    |
|                                | CK#  |  |                                   |               |                    |
| <b></b>                        | ID#  |  |                                   |               |                    |
|                                | CK#  |  |                                   |               |                    |
| <del></del>                    | ID#  |  |                                   |               |                    |
|                                | CK#  |  |                                   |               |                    |
|                                |  |  |                                   | SUB-TOTAL     | \$ 400,00          |
|                                |  |  | TOTAL (If last page of ti         | nis schedule) | \$400.00           |

| THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:   |   |
|--|---|
| Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)   |   |
| Expenditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to the control of the candidate's committee. | 0 |

| Page | <br>of | <br> |  |
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|      |        |      |  |

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE D COMMITTEE NAME (Must be same as on Statement of Organization) INCURRED (Rev. 08/98) INDEBTEDNESS Committeeto Reflect Glenice Grabor for Recorder CHECK THIS BOX IF AMENDING NOTE: Debts previously reported that remain unpaid must be included on this Schedula, as well as any new obligations incurred in this period. Reset Form **FORM** An "incurred debt" is a debt for DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD goods or services ordered or (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F) received, but not paid for by the and of the reporting period., regardless of whether an invoice has been received. DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED DATE BALANCE OWED AT INCURRED NAME AND ADDRESS OF PERSON CLOSE OF (MM/DD/YR) TO WHOM DEBT OR OBLIGATION IS OWED REPORTING PERIOD Glenice Graber Leader Reord 26405 Uine Ave 11-4-10 Bonaparte, IA 52620 Van Buren Register 11-11-10 Same as About £~a~~ 1337.53 Same as Above 10-18-16 10-18-10 SUB-TOTAL 68 TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD 2418.68 "if actual figure is unknown, show "extimated" beside the figure. Page. (for Schedule D) **CANDIDATE COMMITTEES NOTE:** "incurred indebtedness also includes each personventity with whom the candidate's committee has entered into a contract during the reporting period for future

or continuing performance. Enter the name of the consultant who provides or procures services for items such as solventising, fund-relsing, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.